પૂક્ષ્વ⁹

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

09838084

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN													
-			(Colur	(Column 1)		(Column 2)		TYPE		OF	SMAL		
	TOTAL CLAIMS							RATE	FEE	7	RATE	FEE	
F	OR	иимве	NUMBER FILED		NUMBER EXTRA		BASIC F	EE 370.0	0 OF	BASIC FE			
	TOTAL CHARGEABLE CLAIMS			mįnus 20=		*		X\$ 9=		OF	X\$18=		
IV.	IDEPENDENT		minus 3 =		*		X42=	1	OR	7/0/	 		
\mathbb{L}^{M}	ULTIPLE DEPI	ENDENT CLAIM	PRESENT					+140=	- 	7		 	
* If the difference in column 1 is less than zero, enter "0" in						column 2	•	TOTAL		OR OR	TOTAL	 	
	CLAIMS AS AMENDED - PART II							TOTAL	· L			THAN	
_	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR		ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMB PREVIO PAID B	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 50	Minus	# 2	0	=		X\$ 9=		OR	X\$18=		
	Independent	ENTATION OF A	Minus	###	<u> </u>	=		X42=	·	OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+280=		
								TOTAL		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)								!				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE	
	Total	* .	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MI	JETIPLE DEI	PENDENT	CLAIM			+140=		OR	+280=	·	
							L	TOTAL DDIT. FEE			TOTAL	· · · · · · · · · · · · · · · · · · ·	
	•	(Column 1)		(Columi	n 2)	(Column 3)	A	JUII. PEC			DDIT. FEE	· · · · · · · · · · · · · · · · · · ·	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ST ER ISLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		n		X\$ 9=		OR	X\$18=		
A ME	Independent	*	Minus	***		=	上	X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									<u> </u>			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=			
** If	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR AC	TOTAL DIT. FEE		
Tì	ne "Highest Numi	ber Previously Paid	For" (Total or	Independent) is the I	nighest number	found	in the app	ropriate box	in colun	nn 1.		